

September, 1954
Vol. XV, No. 9

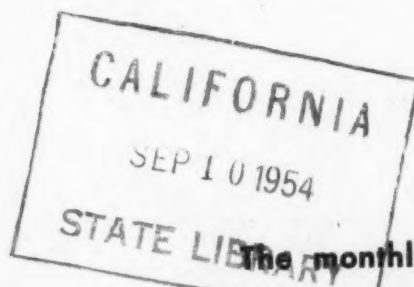
Bulletin on Current Literature

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The monthly bibliography for
workers with the handicapped

The NATIONAL SOCIETY
for CRIPPLED CHILDREN and Adults, Inc.
11 SO. LA SALLE ST., CHICAGO 3, ILL.

• SINCE 1921 THIRTY-THREE YEARS OF SERVICE

The NATIONAL SOCIETY

for



CRIPPLED CHILDREN *and* ADULTS

Founded in 1921, the National Society for Crippled Children and Adults, the Easter Seal Society, is a nationwide federation of fifty-two state and territorial societies dedicated to the purpose of helping crippled children and adults. This objective is implemented through a three-fold program:

Education of the public as a whole, of professional persons concerned with the care and treatment of the crippled, of the families of the crippled, particularly parents, and of volunteers and employers.

Research to provide increased knowledge of the causes and prevention of crippling, and of improved methods of care, education and treatment of crippled children and adults.

Direct services to improve the health, welfare, education, recreation and employment opportunities for the crippled, toward the goal of rehabilitation.

IMMEDIATE PROGRAM AND SERVICES

Services are determined by unmet needs, existing facilities, resources of the Society

and availability of trained personnel and include case finding, diagnostic clinics, medical care, physical, occupational, and speech therapy, treatment centers, rehabilitation centers and curative workshops, mobile clinics, special education, social service, psychological services, sheltered workshops and homebound employment, promotion of employment opportunities for the crippled, recreation, and provision of equipment and prosthetic devices.

The National headquarters provides professional consultation in program planning and community organization to state and local member societies. It maintains liaison with medical specialty groups, offers legislative guidance, a nationwide lending library devoted to literature on handicapping conditions, and a free national personnel registry and employment service which recruits and refers professional workers. It also has an active program of professional education, including scholarships and fellowships, summer workshops for training of professional personnel, exhibits at professional meetings and the publication and distribution of printed materials.

11 SOUTH LA SALLE STREET :: CHICAGO 3, ILLINOIS

AMPUTATION--BIOGRAPHY

See 997.

ARTHRITIS--MENTAL HYGIENE

902. Blom, Gaston E. (Massachusetts General Hospital, Fruit St., Boston 14, Mass.)

Emotional factors in children with rheumatoid arthritis, by Gaston E. Blom and Grace Nichols. Am. J. of Orthopsychiatry. July, 1954. 24:3: 588-601.

This is a preliminary report of experience in psychotherapy with 28 children--23 girls and 5 boys--ranging in age from 2 to 16 years. The children typically manifested depressive, withdrawn, listless behavior covered by extreme dependency and oral sadistic and destructive fantasies, and like their mothers, were unable to express their feelings. The mothers showed a pattern of slavish masochistic devotion to the arthritic child as well as in other areas of life. Results of psychotherapy with the children indicated improvements "in terms of general emotional adjustment and adjustment to the disease rather than in joint symptoms. It did seem that remissions came sooner, there was more effective response to medical treatment, and there were fewer attacks. Emotional and physical improvement did not always progress simultaneously."

ARTHRITIS--STATISTICS

903. Mintz, Bernice (School of Pub. Health, Columbia Univ., New York 27, N. Y.)

Occupational aspects of rheumatic diseases--a review, by Bernice Mintz and Leonard J. Goldwater. Industrial Med. and Surgery. Aug., 1954. 23:8: 335-342.

Statistics on the prevalence of arthritis in industry is discussed. "Most individuals affected by these diseases can continue to work. The more severely disabled may require adjustments either by changing their work or re-engineering their present jobs. Certain occupational factors appear to be associated with an excessive incidence of arthritis and rheumatism: outdoor work and exposure to cold, excessive use of the same muscles, and postural conditions involving strain on the musculo-skeletal system; acute trauma . . . "--Summary. 63 references.

AUDIOMETRIC TESTS

904. Doerfler, Leo G. (Sch. of Med., Univ. of Pittsburgh, Pittsburgh, Pa.)

The measurement of hearing loss in adults by galvanic skin response, by Leo G. Doerfler and Catherine T. McClure. J. Speech and Hearing Disorders. June, 1954. 19:2:184-189.

"The 1000-cycle threshold of hearing for adults with conductive hearing loss can be determined in an objective manner by improved instrumentation and proper experimental design in the use of the galvanic skin response. Using this technique and objective criteria, it is necessary for the tester only to follow an appropriate schedule of presentation of stimuli. No subjective decisions or manual presentations need be made during the test, nor need the tester even see the patient. Certain questions involved in conditioning the galvanic skin response are raised and suggestions for appropriate research made. "--Summary.

AUDIOMETRIC TESTS (continued)

905. Stewart, Kenneth C. (Grad. Sch. of Public Health, Univ. of Pittsburgh, Pittsburgh, Pa.)

A new instrument for detecting the galvanic skin response. J. Speech and Hearing Disorders. June, 1954. 19:2:169-173.

"... This instrument as described has been employed in research and clinical studies since 1951. Continuing use of this GSR detector has demonstrated its simplicity and ease of operation in practical applications. Because the instrument requires no adjustments after the initial gain-control setting, the operator is free to devote full attention to the test situation It has certain definite advantages lacking in older instruments: (1) is selective to the GSR, (2) requires no manipulation during use, (3) provides a chart record that is easier and more positive to analyze. Research studies utilizing the instrument are reported in this issue of the Journal (see #904) and in the article titled "Some Basic Considerations in Applying the GSR Technique to the Measurement of Auditory Sensitivity," by Kenneth C. Stewart, p. 174-183)

BLIND--DIRECTORIES

See 998.

BOY SCOUTS

906. Delp, Harold A. (Vineland Training School, Vineland, N. J.)

How can we help him? Scouting. July-Aug., 1954. 42:6:10-11, 20.

A psychologist discusses the advantages of Scouting for the training of mentally retarded boys, how the Scout leader may recognize retardation in his group, and some of the major problems to be overcome in integrating these boys in the group.

CAMPING

See 962.

CEREBRAL PALSY

See 926; 927; 995.

CEREBRAL PALSY--HISTORY

907. Berger, Clyde C. (Institute of Logopedics, Wichita, Kan.)

On the library shelf; papers by Dr. William J. Little. Cerebral Palsy Rev. June-July, 1954. 15:6 & 7:24-25.

A summarization of the important points brought out in the papers of Dr. William J. Little, an English orthopedist of the 19th century who, as early as 1843, published a series of papers presenting the subject of cerebral palsy. Dr. Little's ability as a clinical observer is attested by his writings in which a majority of the basic observations on cerebral palsy found in current literature appear. Dr. Little's importance as a pioneer in the field of cerebral palsy is stressed.

CEREBRAL PALSY--PARENT EDUCATION

908. Levinson, Helen J. (144-80 Sanford Avenue, Flushing 55, N. Y.)

A parent training program for a cerebral palsy unit. J. Speech and Hearing Disorders. June, 1954. 19:2:253-257. Reprint.

An intensive program of parent education carried on at the cerebral palsy unit of Public School 67, Brooklyn, N. Y., includes education on speech

CEREBRAL PALSY--PARENT EDUCATION (continued)

therapy. This paper is a description of that part of the program. Included is material on psychological readiness, motivation, muscle training, and sounds which is handed the parents in printed form after monthly discussions of the topics. A short list of suggested readings for parents is given.

CEREBRAL PALSY--PROGRAMS

909. Abbott, Marguerite (369 Lexington Ave., New York, N. Y.)

Considerations in community planning for the cerebral palsied. Cerebral Palsy Rev. June-July, 1954. 15:6: & 7:20-21, 27.

Miss Abbott recommends careful exploration and case findings to ascertain the actual needs for cerebral palsy facilities in a community, the full utilization of medical-professional resources in the planning stages, a study of geographic factors influencing the location and type of services, and the value of surveys. She suggests local sources helpful in locating cerebral palsy cases.

CEREBRAL PALSY--PSYCHOLOGICAL TESTS

910. Doll, Edgar A. (School District #501, P. O. Box 1068, Bellingham, Wash.)

Intelligence and cerebral palsy. Cerebral Palsy Rev. June-July, 1954. 15:6 & 7:8-9, 19, 27.

Reviews briefly early psychological work with the cerebral palsied and stresses the need for both subjective and objective evaluation procedures in testing the intelligence and potentials of cerebral palsied children. The difference between potential and function is important not only for diagnosis but especially for prognosis, the author believes.

CEREBRAL PALSY--SOCIAL SERVICE

911. United Cerebral Palsy of New York City

Cerebral palsy, a social problem; proceedings of a symposium conducted by . . . in cooperation with The Study Group of Social Workers in Cerebral Palsy, presented at The New York School of Social Work . . . November 9, 1953. New York, U.C.P. of New York City (1954). 47 p.

Presents three papers prepared by members of The Study Group of Social Workers in Cerebral Palsy on "The Child with Cerebral Palsy and His Family," "The Dilemma of the Adolescent," and "The Needs of the Adult." The first deals with aspects of the complex inter-relationships between child, family, and community and areas in which social work can contribute. The psychological difficulties of the adolescent and how community planning and coordination of services can help to resolve them are discussed in the second. The third describes the social workers' role in the team approach to rehabilitation in treatment centers for the adult. Mrs. Helen Wortis presents recommendations of the Study Group.

Available from United Cerebral Palsy of New York City, 47 W. 57th St., New York 19, N. Y.

CEREBRAL PALSY--SPEECH CORRECTION

912. Egland, George O. (1745 W. Broadway, Eugene, Ore.)

An analysis of an exceptional case of retarded speech. J. Speech and Hearing Disorders. June, 1954. 19:2:239-243.

CEREBRAL PALSY--SPEECH CORRECTION (continued)

A case history of a three-year old boy with retrolental fibroplasia and cerebral palsy whose speech retardation presented special problems which made it difficult to find approaches adapted to his speech training. The author stresses that without the understanding of his parents and their cooperation in home treatment his development would not have been so successful. Techniques are described; a subjective type of appreciation for babbling had to be provided, strong enough to counteract his fixed outward attentiveness to an unexplored and perplexing world.

CEREBRAL PALSY--SURVEYS--NORWAY

913. Andersen, Bjarne (Ulleval Hospital, Oslo, Norway)

Cerebral palsy. J. Oslo City Hospitals. 1954. 4:65-87. Reprint.

A report of a study of the incidence of cerebral palsy in Østfold County, Norway. Statistical data on the organization of the survey, incidence as compared to other countries, types of cerebral palsy, distribution by age group and extremities involved, etiologic factors, speech impairment, and mental retardation are given. Causative factors and the usefulness of electroencephalography and pneumoencephalography are discussed. Therapeutic approach to the problems presented by cerebral palsy is considered briefly.

CHILD HEALTH--SURVEYS

914. American Academy of Pediatrics

The weapon of truth; the influence of the study of child health services conducted in 1946-1948, by Paul W. Bevan. Pediatrics. July, 1954. 14:1:64-76.

An historical review of the origin and background of the Study of Child Health Services, carried out by the American Academy of Pediatrics, with the assistance of the U. S. Children's Bureau and the U. S. Public Health Service. It describes the work of various committees in many fields of child health and the results of the survey, in terms of improved services, improved pediatric education and improved relations between the Academy and other agencies working for the welfare of children.

CHILDREN'S HOSPITALS

915. Quibell, E. P. (Heritage Craft Schools and Hospitals, Chailey, Sussex, England)

The child in the long stay hospital; a medical social problem. Almoner. July, 1954. 7:4:142-149.

A discussion of the long-term patient placed in a children's hospital, his need for visitors, the restrictions placed on visiting, and the experience of this particular institution with infections carried into the hospital by visitors or transfers from other hospitals. The parental and family link must be maintained for these children and the relationship between staff and parents should be frank, informed and sympathetic.

CHRONIC DISEASE--DIAGNOSIS

916. Dennison, A. D., Jr. (701 E. 78th St., Indianapolis, Ind.)

Organic diseases simulating psychogenic disorders. J. Med. Soc. of New Jersey. Nov., 1953. 50:11:520-523. Reprint.

CHRONIC DISEASE--DIAGNOSIS (continued)

"1. A variety of organic illnesses present early symptoms suggesting psychic disorders. 2. Among these the most prominent are multiple sclerosis, myxedema, carcinoma of the pancreas, minor cerebral vascular accidents, allergic toxemia, hyperparathyroidism, and myasthenia gravis. These are discussed, and several others mentioned briefly. 3. Care is recommended in differentiating these conditions from emotional disease."--Summary.

CLEFT PALATE--ETIOLOGY

917. Schwartz, Ralph (Children's Rehab. Institute for Cerebral Palsy, Reisters-town, Md.)

Familial incidence of cleft palate. J. Speech and Hearing Disorders. June, 1954. 19:2:228-238.

The literature is reviewed concerning general incidence of cleft palate and a listing of various etiologic concepts is presented, with special attention to the subject of heredity. A survey of cases of cleft palate from the files of the Institute of Logopedics, Wichita, Kansas, is presented with findings and conclusions.

CONVALESCENCE--GREAT BRITAIN

918. Great Britain. Institute of Almoners (Tavistock House North, Tavistock Sq., London W. C. 1, England)

Problem of convalescence. Almoner. July, 1954. 7:4:129-140.

A report prepared by the Institute of Almoners, summarizing data gathered in a survey of convalescent home facilities in England in 1952. Statistics are given on the disposal of over 2,000 cases, the waiting time for admittance to such homes. Limitations existing at present are discussed and the need for an assessment of adult and children's requirements is stressed.

DEAF

919. Health News, N. Y. State Dept. of Health. July, 1954. 31:7.

Entire issue devoted to the subject.

Contents: Hearing aids for children, Herman E. Hilleboe. -Children with impaired hearing, Clarence D. O'Connor. -Prevention of deafness; when and by whom, Edmund Prince Fowler. -(Book review) Hearing and deafness; a guide for laymen, ed. by Hallowell Davis; reviewed by Powrie V. Doctor.

Articles describe services available under the state aid program to hard-of-hearing children in New York.

920. Netherlands. University of Groningen

Proceedings of The International Course in Paedo-Audiology, June, 1953. Groningen, The University (1954). 123 p. illus., tabs.

Subjects covered in the papers of the course deal with the significance of hearing in man, the psychology of hearing and non-hearing, screening techniques for the assessment of hearing loss, the etiology of impaired hearing and the part played by heredity, audiological education and new methods of training the child with hearing impairment.

DEAF--MENTAL HYGIENE

921. Gallaudet College (Kendall Green, Washington 2, D. C.)

Counseling the deafened; developing psychological acceptance of the disability in counseling adolescents and young adults, by Irving S. Fushfeld. Washington, D. C., The College, 1954. 22 p. (Bul. no. 2, Vol. 3, May, 1954)

DEAF (continued)

In counseling those with impaired hearing, special factors incident to the handicap must be considered in addition to factors ordinarily dealt with in the non-handicapped. The differences between psychological and non-psychological acceptance of the handicap are pointed out. Disadvantages and advantages of deafness, as stated by the adolescent and young adult hard of hearing, are listed. Parental influence and schooling are important factors in the satisfactory adjustment of deaf children. Age at onset of deafness affects acceptance of the handicap.

DEAF--PSYCHOLOGICAL TESTS

922. Du Toit, J. M. (School for the Colored Deaf, Worcester, S. Africa)

Measuring the intelligence of deaf children; a new group test. Am. Annals of the Deaf. Mar., 1954. 99:2:237-249.

" . . . Some of the important principles to be taken into account when constructing tests for the deaf were stated, and a brief outline given of the methods followed in our own attempt. The coefficient of reliability of this new test was found to be high (.959 by the split half method, with hearing subjects; .969, by repetition, with deaf subjects). The validity was tested by three different criteria: standard group test (in the case of hearing subjects), teachers' ratings, and an individual test specially constructed for the deaf. As a result, our test was deemed highly valid. Some calculations, performed to prove the complete exclusion of any influence of language on our test, were described; the findings in this connection could also be considered to throw some light on the general problem of the influence of language on intelligence"--Summary.

923. Lavos, George (Michigan School for the Deaf, Flint, Mich.)

Interrelationships among three tests of non-language intelligence administered to the deaf. Am. Annals of the Deaf. May, 1954. 99:3:303-313.

"The purpose of this study was to ascertain the degree of correlation among three group tests of non-verbal intelligence when applied to the deaf. The three tests used are the Chicago Non-Verbal Examination, the Pintner General Ability Tests, Non-language Series, Intermediate Battery, and the Revised Beta Examination (Lindner-Gurvitz standarization). " 90 pupils were selected at random. The average age at which the Chicago was administered was 12 1/2 years; 15 years, 7 months for the Pintner; and 17 years, two months for the Beta. "With the exception of the coefficient for those with the greater interval between administrations of the Chicago and the Beta, the coefficients ranged in the .60's. The exceptional coefficient was .58. All coefficients are statistically significant. "

924. Templin, Mildred C. (Institute of Child Welfare, Univ. of Minn., Minneapolis 14, Minn.)

A qualitative analysis of explanations of physical causality: I. Comparison of hearing and defective hearing subjects. Am. Annals of the Deaf. Mar., 1954. 99:2:252-269.

"Explanations of the causes of 21 physical phenomena were written by 293 defective hearing and 565 hearing subjects between ten and twelve years of age. These explanations were classified qualitatively according to the methods of Piaget and Deutsche. Comparisons were made between the explanations of 1) the entire sample of defective hearing and 293 of the hearing subjects

DEAF--PSYCHOLOGICAL TESTS (continued)

and 2) three matched groups: 78 deaf, 78 hard of hearing and 78 hearing subjects matched on age, sex, grade placement and intelligence "Summary.

Indications of the analysis are given and findings of the study have important implications for the training of the defective hearing. The author believes that training procedures for the deaf are probably restricting their approach to problems as well as their acquisition of knowledge.

DEAF--SPECIAL EDUCATION

925. Harris, Nathan P. (Horace Mann School, Roxbury, Mass.)

Some aspects of school placement of young deaf children. Am. Annals of the Deaf. May, 1954. 99:3:293-302.

Arguments for placing the deaf child in a school for the deaf are presented.

See also 955.

DENTAL SERVICE

926. Album, Manuel M. (1930 Chestnut St., Philadelphia 3, Pa.)

Trichloroethylene anesthesia for operative dentistry on handicapped patients, by Manuel M. Album and Margery Van N. Deming. Oral Surgery, Oral Med., and Oral Pathology. May, 1954. 7:5:488-498. Reprint.

Gives a brief history of trichloroethylene, its chemical and pharmacologic properties, and its use as an anesthetizing agent in dental work with handicapped children. Methods of administration of the anesthetic and several case histories are described.

927. Kopel, Hugh M. (6767 W. Outer Dr., Detroit 35, Mich.)

Dentistry and the child with cerebral palsy. Cerebral Palsy Rev. June-July, 1954. 15:6 & 7:10-13, 23.

A discussion of some of the problems in the management and performance of routine dental care for the cerebral palsied child. Parents are advised on proper oral hygiene, fortification of the diet of the cerebral palsied and parental preparation of the child for dental procedures. Dr. Kopel discusses premedication and anesthesia as aids in controlling bodily movements which hamper the dentist in his work with these children.

ELECTROENCEPHALOGRAPHY

928. Gibbs, Frederic A. (720 N. Michigan Blvd., Chicago 11, Ill.)

Value of electroencephalography. Modern Med. July 15, 1954. 22:14:75-82.

A discussion of what is revealed by the electroencephalogram, its usefulness in demonstrating organic brain disorder, its value in various types of disease and brain damage, and its clinical use in the diagnosis, localization, prognosis, and regulation of treatment in epilepsy. One of the chief values of electroencephalography is its ability to detect organic brain disorder when clearly diagnostic signs and symptoms are not present.

EMPLOYMENT

929. Rice, Loren T.

The disabled in hospital employment. Washington, D. C., Office of Voc. Rehabilitation, 1954. 14 p. (Rehab. service ser., no. 275) Mimeo.

EMPLOYMENT (continued)

Abstract of a dissertation entitled "A survey of policies pertaining to the employment of the physically disabled in a selected group of hospitals," School of Nursing Education, Catholic University of America.

A report of the findings of a questionnaire survey of 220 hospitals, each with a bed capacity 300-400, to which 102 hospitals responded. Disabled persons are employed in hospitals notwithstanding the fact that flexibility of job functions is often necessary. Tuberculosis hospitals employ an average of 35 disabled persons per hospital while mental hospitals have only one or two each. It is evident that hospital administrative staffs need to be more familiar with selective placement practices. The more experience an administrator has with disabled employees, the higher his evaluation of their performance tends to be. Disabled employees are rated as being just as efficient as regular employees. They tend to be rated superior in jobs requiring skill, education, or knowledge. Disabled employees work in all departments, and possess many different types of disabilities.

Distributed by the U. S. Office of Vocational Rehabilitation, Washington 25, D. C.

FOOT

930. Herzmark, Maurice H.

A play-pen pad that trains the infants to walk correctly. Brit. J. Phys. Med. July, 1954. 17:7:150-154.

"The anthropology and physiology of the human foot are discussed with special reference to the causes of weak feet or flat-foot. Attention is called to the manner in which the irregularities of a natural terrain develop strong active feet, and a pad simulating this is described as a means of training infants to develop proper habits of walking, thus forestalling the disability of flat-foot. Observations made over a period of years by physicians and parents, whose children used the pad, have shown encouraging results"
--Summary.

GIFTED CHILDREN

931. Terman, Lewis M. (761 Dolores St., Stanford University, California.)

The discovery and encouragement of exceptional talent. Am. Psychologist. June, 1954. 9:6:221-230.

Dr. Terman, in the first Walter Van Dyke Bingham lecture at the University of California in March, 1954, reviews his experiences with mental tests in relation to gifted children and their value in determining later achievement. He discusses the question of educational acceleration for the gifted and improved programs to encourage those of exceptional talent to work at their intellectual best.

HANDICAPPED--STATISTICS

932. U. S. Office of Vocational Rehabilitation (Washington 25, D. C.)

Number of disabled persons in need of vocational rehabilitation. Washington, D. C., The Office, 1954. 12 p. (Rehabilitation Serv. ser. no. 274) Mimeo.

A report prepared to show the methods used in arriving at estimates of persons needing vocational rehabilitation services. Designed for staff use in the Office of Vocational Rehabilitation, it will also be found useful by workers in state and community rehabilitation programs and all those concerned with rehabilitation problems.

HARD OF HEARING

See 976.

HEART DISEASE

933. McQuillan, Malcolm D. (Croyden Hall Academy, Atlantic Highlands, N. J.)
Cardiac adolescents. School and Society. July 24, 1954. 80:2038:23-26.

Three representative cases of common forms of cardiac conditions in adolescents illustrate the signs and symptoms associated with each, treatment, ability to participate in various types of activities, and educational provisions for the cardiac patient. Continual fatigue and pains in the joints are the danger signs which teachers and parents should heed in adolescents, with immediate referral to a physician.

HEART DISEASE--EMPLOYMENT

934. Franco, S. Charles (4 Irving Pl., New York 3, N. Y.)
The cardiac can work. Indust. Med. and Surgery. July, 1954. 23:7:315-320. Reprint.

Reports the experience of Consolidated Edison Company of New York City with a program of adequate medical service and selective placement of cardiac workers. Statistical data from a survey of 24,473 employees during 1952 are presented; tables cover 896 cases of heart disease. The various forms of heart disease are discussed.

This article was presented in an abridged version at the "Heart in Industry Conference" of the New York Heart Association in November, 1953.

HOBBIES

935. Burlingame, Alice Wessels
Therapy as near as your garden door. Hospitals. Aug., 1954. 28:8:99.
Two years ago the Horticultural Department of the Michigan State College began to present workshops to train occupational therapists and community gardeners so that they may successfully initiate and supervise horticultural therapy programs. Factors to be considered are briefly suggested.

HOSPITALS--PHYSICAL THERAPY DEPARTMENT

936. Western Hospital Association
Symposium on administration: Physical therapy departments in voluntary hospitals. Physical Therapy Rev. Aug., 1954. 34:8:383-390.
Symposium on administration, Physical Therapy Section, Western Hospital Association meeting, Los Angeles, April, 1954.
Contents: Are physical therapy departments in voluntary hospitals meeting community needs, by Gordon W. Gilbert. -Physical therapy as an integral part of the administration of a large hospital, by Robert J. Thomas. -Are there adequate physical therapy departments in hospitals today, by J. E. Maschmeyer.

LARYNGECTOMY

937. Dornhorst, A. C. (St. Thomas's Hospital. Med. School, London, England)
Speech after removal of upper end of oesophagus and the larynx, by A. C. Dornhorst and V. E. Negus. Brit. Med. J. July 3, 1954. 4878:16-17.
The possibility of speech following removal of the upper end of the esophagus and the larynx, with part of the pharynx, is illustrated by a case report.

MEDICINE--DICTIONARIES

938. Connecticut. State Department of Education (Bur. of School and Community Services, State Dept. of Education, Hartford 15, Conn.)

Glossary; definitions of common medical terms in orthopedics, cardiology and ophthalmology frequently encountered by non-medical personnel working with exceptional children. Hartford, The Dept., 1954. 25 p. Mimeo.

A listing of terms selected with the advice of consultants in education, therapy and medicine with standard definitions revised and simplified. Prepared for those working with physically handicapped children.

MEDICINE--RESEARCH

See 999.

MENTAL DEFECTIVES

939. Jacob, Walter

New hope for the retarded child. New York, Public Affairs Committee, c1954. 28 p. (Public Affairs pamphlet no. 210)

A thoughtfully prepared pamphlet for general distribution which covers types and causes of mental retardation, symptoms and diagnosis, and what can be done to help retarded children and their parents. Facilities for the education and training of retardates are discussed. Includes a brief bibliography.

Available from Public Affairs Committee, 22 E. 38th St., New York 16, N. Y., at 25¢ a copy.

MENTAL DEFECTIVES--NEW ZEALAND

940. New Zealand. Department of Education (Parliament Bldg., Wellington, N. Z.)

Intellectually handicapped children; report of the consultative committee set up by The Hon. The Minister of Education in August, 1951. Wellington, N. Z., The Department., 1953. 42 p.

A discussion with recommendations on facilities and care of children between the ages of 5 and 18 who are incapable of instruction in special classes in public schools in New Zealand. Facilities for children over 18 are also considered. Statistical data on the incidence of mental deficiency among children in New Zealand are included. Various types of institutional care, day care, and occupational groups for the older mental defective are described.

MENTAL DEFECTIVES--EMPLOYMENT

941. Hitchcock, Arthur A. (Univ. of Nebraska, Lincoln 8, Neb.)

Vocational training and job adjustment of the mentally deficient. Am. J. Mental Deficiency. July, 1954. 59:1:100-106.

A consideration of vocational training and adjustment from the professional counselor's point of view. Work with the mentally handicapped involves vocational planning, training, placement and job adjustment; the writer discusses these four areas in reference to the mentally handicapped and shows how this type of work differs from the counseling of the average individual.

MENTAL DEFECTIVES--PARENT EDUCATION

942. Minnesota. Department of Public Welfare (117 University Ave., St. Paul 1, Minn.)

You are not alone; information helpful to parents of retarded children. St. Paul, The Department, 1954. 21 p.

MENTAL DEFECTIVES--PARENT EDUCATION (continued)

A booklet prepared by experienced social workers and psychologists with the assistance of parents of retarded children and physicians. It emphasizes the help in Minnesota which the county welfare board can give, because of its legal functioning, in helping parents plan for retarded children.

MENTAL DEFECTIVES--PROGRAMS

943. Rosenzweig, Louis E. (81-35 189th St., Jamaica 3, N. Y.)

The habilitation of the mentally retarded. Am. J. Mental Deficiency. July, 1954. 59:1:26-34.

Five essentials of a pattern for the habilitation of mentally retarded children are discussed. Through early diagnosis and prognosis, early training, realistic schooling, imaginative protection, and public enlightenment these children may be provided with the maximum possibilities for growth yet with adequate protection so that their capabilities may be utilized.

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS

944. Bliss, Monte (Vineland Training School, Vineland, N. J.)

Measurement of mental age as indicated by the male figure drawings of the mentally subnormal using Goodenough and Machover instructions, by Monte Bliss and Andrew Berger. Am. J. Mental Deficiency. July, 1954. 59:1:73-79.

Reports an experiment using 36 boys between the ages of 9 and 17 from the Vineland School population to test the hypothesis that subjects drawing the human male figure in response to the Goodenough administration will obtain an M. A. significantly higher than when producing the figure under Machover instructions, scoring both drawings according to the Goodenough scale. The hypothesis was verified with subjects of familial etiology; organics do somewhat better on the Goodenough but not significantly so. With the unexplained cases of retardation, there appeared to be practically no difference between the two drawings. It is tentatively suggested that clinicians use the procedure of estimating mental ages of non-familial mentally defective children with Goodenough scoring of male figures drawn under Machover instructions.

Other articles on psychological testing appearing in this issue are: "Test-retest and split-half reliabilities of the Wechsler-Bellevue scales and subtests with mental defectives," by Alfred Butler; pp. 80-84. - "The learning of a spatial relations test by adult imbeciles," by J. Tizard and F. M. Loss; pp. 85-90. - "The performance of brain-injured children on the Goldstein-Scheerer tests," by Virginia C. Halpin and Ruth M. Patterson; pp. 91-99.

MENTAL DEFECTIVES--RECREATION

See 906; 968.

MENTAL DEFECTIVES--RESEARCH

945. Powers, Grover F. (167 Armory St., New Haven 11, Conn.)

Research and the National Association for Retarded Children. Am. J. Mental Deficiency. July, 1954. 59:1:59-66.

The writer gives examples of basic research and practical research, both types which the National Association for Retarded Children should support in their work for the welfare of the mentally retarded. Possible fields for support are the conducting of surveys, the training of personnel, the use of funds for specific study projects, study, symposia and seminars on research in mental retardation, and the founding of an institute for the study of prenatal malformations.

MENTAL DEFECTIVES--SPECIAL EDUCATION

946. American Association on Mental Deficiency

The education of the mentally retarded child in a democratic society; a panel discussion. Am. J. Mental Deficiency. July, 1954. 59:1:35-47.

Contents: Introduction, Eli M. Bower. -Public education and the severely retarded child, Frances A. Caine. -Does special education result in positive changes in the personal and social adjustment of mentally retarded children?, Ernest P. Willenberg. -Problems of mentally retarded children in the upper grades and the junior high school, Edgar Taylor, Jr. -A study of mentally retarded students in San Diego City high schools, Cassie C. Clapper. -The role of state legislation and leadership in extending educational opportunities for mentally retarded children, Mary Frances Martin.

947. Whitney, E. Arthur (Elwyn Training School, Elwyn, Pa.)

The E. T. C. of the mentally retarded. Am. J. Mental Deficiency. July, 1954. 59:1:13-25. Reprint.

Some comments on what has been done educationally for the mentally retarded child in the United States, a comparison of various types of special education and their relative advantages and disadvantages for the child and his family, and a discussion of the care and training of these children by parents and schools.

This paper was read at the first annual meeting of the North Carolina Association of Parents and Friends of Mentally Retarded Children, September, 1953.

See also 968; 986.

MENTAL DEFECTIVES--SPECIAL EDUCATION--ILLINOIS

948. Baumgartner, Bernice B. (Off. of Ill. State Superintendent of Public Instruction, Springfield, Ill.)

There is a rainbow in the sky. Public Aid in Illinois. July, 1954. 21:6:1-3.

A description of some pilot study projects set up in twelve communities in Illinois for the purpose of discovering what can be done educationally and socially for the mentally retarded child who is too low in intelligence for the educable mentally handicapped classes in the public schools. The writer, as consultant to the Pilot Study Programs for Trainable Children, describes types of children included in the program, what has been accomplished in their training and the problems growing out of the project which have yet to be solved.

In this same issue: Working with the families of handicapped children, Esther Schour, p. 4. -I have a conviction, Ray Graham.

MENTAL DEFECTIVES--SPEECH CORRECTION

949. Strazzulla, Millicent (1879 E. 29th St., Brooklyn 29, N. Y.)

A language guide for the parents of retarded children. Am. J. Mental Deficiency. July, 1954. 59:1:48-58.

An article in the form of a letter to parents of retarded children, answering questions on speech training and suggesting ways for improving speech and language skills, for acquiring physical skills, and for teaching the child to get along better with other children.

MENTAL DISEASE--SPEECH CORRECTION

950. Moses, Paul J. (School of Medicine, Stanford Univ., Palo Alto, Calif.)
Vocal cord neurosis. Transactions, Am. Acad. of Ophthalmology and Otolaryngology. May-June, 1954. 58:3:478-485.

Neurotic symptoms may be expressed acoustically in respiration, phonation and resonance. Examples of voice deviations and their emotional causes are given. The laryngologist should acquire the necessary psychological understanding to help the many patients with functional voice problems, since it is impossible to refer them all to psychiatrists.

MENTAL HYGIENE

951. Perrin, Elinor Horwitz (6917 McPherson Blvd., Pittsburgh, Pa.)
The social position of the speech defective child. J. Speech and Hearing Disorders. June, 1954. 19:2:250-252.

Reports an investigation to provide data concerning the social position of the speech defective child in the school classroom. The study was conducted in a small midwestern community of less than 3,000 population; subjects were 445 children in grades one through six. Results are discussed; it was concluded that many speech defective children are not readily accepted members of their classroom group. Reasons for the isolation and neglect of the speech defective child are not made evident, but the study does emphasize the need for the speech therapist to help patients make better adjustment in interpersonal situations especially in the early grades.

MULTIPLE SCLEROSIS

952. Benedict, William L. (100 First Ave. Bldg., Rochester, Minn.)
Multiple sclerosis. J., Mich. State Med. Soc. June, 1954. 53:6:633-637, 666.

A typical example of the clinical problems encountered in the management of patients with multiple sclerosis is presented with a case history. The only symptom suffered by the patient was loss of vision in one eye; she has suffered three episodes of blindness. With fever therapy she made a complete recovery from the first two but since the third attack, the vision has remained blurred.

MULTIPLE SCLEROSIS--MEDICAL TREATMENT

953. Lowry, M. Lester (436 N. Roxbury Dr., Beverly Hills, Calif.)
Pancreatic extract in the treatment of multiple sclerosis. Am. J. Med. Sciences. Mar., 1954. 227:3:259-266. Reprint.

Reports on a study to determine the therapeutic potential of "Depropanex," an insulin- and protein-free pancreatic extract in treating multiple sclerosis. With the concept of a disorder in carbohydrate metabolism advanced as a possible cause for the disease, this drug was chosen because it possessed the ability to act as a dilator of vascular spasm and a potential modifier of carbohydrate metabolism, with a minimum of undesirable side effects or toxicity. Procedure of treatment and 12 brief case reports are included. Locomotion, bladder control, eye symptoms, spasticity and coordination, speech strength, endurance and mental status improved in varying percentages. The writer feels Depropanex deserves an adequate trial in these patients until a more effective therapy is found.

MUSCLES

954. Newman, Louis B. (VA Research Hosp., 333 E. Huron, Chicago, Illinois)

Present status in the management of spasticity and spasm; preliminary report, by Louis B. Newman, Alex J. Arieff, and Reuben R. Wasserman. Arch. Physical Med. & Rehabilitation. July, 1954. 35:7:427-436.

The scope of the problem is far-reaching; 60-70% of the 589 World War II patients and 72% of the Korean patients with upper motor neuron lesions experienced spasticity and/or spasm to some degree. It is felt to date there is no truly effective drug therapy. Neurosurgery should be done only when specifically indicated. Physical medicine and rehabilitation techniques that resulted in some improvement to approximately half of the patients have been described and evaluated. An apparatus that gives promise in evaluating spasticity and spasm and its response to therapy is described. Both basic and clinical research must be continued in order to solve or alleviate this annoying, difficult, and at times frustrating condition, to both patient and physician. --Summary.

MUSIC

955. Sandberg, Mabel W.

Rhythms and music for the deaf and hard of hearing. Volta Rev. June, 1954. 56:6:255-256.

Rhythmic activities in the primary grades should provide for big muscle activities beginning with the march, run, fly, skip, hop, elephant walk and many others, according to the age and grade level. By feeling the vibration of the piano children can be taught not only rhythms that will improve bodily balance and grace but also speech by recognizing word accents and differences in pitch. Glee clubs can include the deaf along with the hard of hearing. Dancing for the small ones may be quite simple, but the various types, including social dancing, encourages group participation and offers to the older group a form of recreation that can be enjoyed with hearing young people.

MYASTHENIA GRAVIS

956. Grob, David (Dept. of Med., Johns Hopkins Hosp., Baltimore 5, Md.)

Abnormalities in neuromuscular transmission, with special reference to myasthenia gravis, by David Grob and A. McGehee Harvey. Am. J. Med. Nov., 1953. 15:5:695-709. Reprint.

A similar discussion of the current state of knowledge concerning clinical situations characterized by an abnormality in the transmission of nerve impulses across the neuromuscular junction. This article is limited to consideration of myasthenia gravis, of a type of paralysis produced by a bacterial toxin, botulism, and to the effects of certain chemicals, including anticholinesterase compounds such as parathion.

957. Levinson, Abraham (30 N. Michigan Blvd., Chicago 2, Ill.)

Myasthenia gravis with mental retardation; report of a case in a 10-year-old boy with special reference to electromyographic studies, psychological evaluations, and autopsy findings, by Abraham Levinson and Lino Ed. Lim. J. Pediatrics. July, 1954. 45:1:80-88.

"A 10-year-old male with symptoms of myasthenic crisis presented diagnostic difficulties at first, with particular reference to bulbar poliomyelitis. Subsequent tests, however, proved the case to be myasthenia gravis. The

MYASTHENIA GRAVIS (continued)

patient was also mentally retarded as shown by his I.Q. and his performance at school. Under Prostigmine therapy he improved, not only physically but mentally, although he never attained normal mentality . . . "-Summary.

NUTRITION

958. Bakwin, Harry (132 E. 71st St., New York 21, N. Y.)

Psychologic aspects of dietary deficiency states. J. Pediatrics. July, 1954. 45:1:110-114.

A brief review of the influence of altered somatic states (in this case various dietary deficiencies) on psychologic functioning. He cites the effects of semistarvation and deprivation of thiamine, niacin and various vitamins on the behavior patterns.

OCCUPATIONAL THERAPY

959. Canada. Ste. Anne's Veterans Hospital, Ste. Anne de Bellevue, Quebec)

Occupational therapy media. Canadian J. Occupational Therapy. June, 1954. 21:2:31-48, 52-59.

Contents: Introduction, E. G. Mickie. -Music as therapy, E. Kingsmill. -Creative expression, S. Marjoribanks. -Finger painting, Y. Richards. -Journalism, B. Hayward. -Crafts, M. MacLean, Y. Richards. -Drama, B. Hayward. -Speech therapy, S. Marjoribanks. -Therapeutic social activities, F. M. Clark. -Recreation with psychotics, D. E. Roose. -Conclusion, D. Lanks.

OCCUPATIONAL THERAPY--RESEARCH

960. American Occupational Therapy Association

Research in occupational therapy; abstracts from the American Occupational Therapy Association institute (1953). Am. J. Occupational Therapy. July-Aug., 1954. 8:4:139-187.

Entire issue devoted to articles on the subject.

Contents: What is research, by Bradford B. Hudson. -The present status of research in occupational therapy, by D. Wells Goodrich. -The evaluation of suggested topics (panel discussion). -A study of the use of magnetic toys in the treatment of cerebral palsied children, by Ruth W. Brunyate. -The painful phantom limb, by Florence M. Stattel. -A device to supply a more comprehensive kinetic therapy in occupational therapy, by Frank W. Jackson. -Reaching the catatonic patient, by Paul Roland. -The aggression potential of two types of objects when used with aggressive children, D. Wells Goodrich. -Technique of analysis and interpretation of data, by Murray Richards. -Arranging and presenting material, by Sydell Braverman. -Training for research: Part I, by Henry N. Peters, Part II, by John H. Rohrer. -Summary and conclusions, by Robert Blake.

OLD AGE--MEDICAL TREATMENT

961. Blanton, James L. (Clifton Springs Sanitarium & Clinic, Clifton Springs, N. Y.)

Essentials for rehabilitation in the aged. J. Am. Geriatrics Soc. Mar., 1954. 2:3:174-178. Reprint.

A discussion of the nutritional, psychosomatic and socio-economic aspects of geriatrics and the factors influencing the successful rehabilitation of the aged and those with chronic disease. Motivation for success can be supplied by the human touch and the inspiration of the personal medical advisor.

OLD AGE--RECREATION

962. Bracken, Felisa (City Dept. of Publ. Welfare, Baltimore, Md.)

Senior citizens go camping. Nursing Outlook. July, 1954. 2:7:360-363.

A report of an experimental camp project, privately financed, for Negro recipients of old age assistance, social security, and persons living on low incomes from other sources. Camp staff, dietary services and recreational activities are briefly discussed.

963. Minnesota. Department of Public Welfare

Games for older people. St. Paul, The Dept., 1954. 18 p. Mimeo.

The third in a series of booklets prepared to assist those who work with the aged, it offers directions for a number of games which may be adapted for use during parties, recreation hours, indoor and outdoor play, and for the bedfast or patient in a wheel chair. These games do not require a great deal of physical effort and much of the equipment can be made by the participants. Other booklets in the series are: "Planning Activities for Older People" and "Hobby Shows for Older People." All three are available from Occupational Therapist, Minnesota Dept. of Public Welfare, Div. of Public Assistance, 117 University Ave., St. Paul 1, Minn.

PARENT EDUCATION

964. Child Study Association of America (132 E. 74th St., New York 21, N. Y.)

First steps in organizing a parent education program. New York, The Association (1954). n. p.

A leaflet outlining the steps in the organization of parent groups, the use of community resources in program planning, types of meetings which may prove valuable, the best way to select a discussion leader, and the responsibilities of the planning committee.

A pamphlet presenting in greater detail some of the suggestions made in this leaflet and titled "When Parents Get Together: How to Organize a Parent Education Program," is available from Child Study Assn. of America at 50¢ a copy.

965. Doll, Edgar A. (School Dist. 501, P. O. Box 1068, Bellingham, Wash.)

New hope for parents. Am. J. Orthopsychiatry. Apr., 1954. 24:2: 416-420. Reprint.

Discusses the trend toward helpful parent education in contrast to educational campaigns which increased individual fearfulness. Recent publications are mentioned as examples of this trend toward reassurance. Dr. Doll cites problems of parent counselors in meeting parents' needs and shows how they may extend relief and hope to parents seeking assistance.

966. Richmond, Julius B. (Dept. of Pediatrics, Coll. of Med., State Univ. of N. Y., Syracuse, N. Y.)

Self-understanding for the parents of handicapped children. Public Health Reports. July, 1954. 69:7:702-704.

Based on a lecture at the annual meeting of the National Society for Crippled Children and Adults in Chicago, November, 1953, this paper discusses the need for self-understanding in parents of handicapped children concerning the significance of physical care, the development of independence in these children, and the healthy sharing of experiences by parents in group activities.

PARTIALLY SIGHTED--RESEARCH

967. National Society for the Prevention of Blindness (1790 Broadway, New York 19, N. Y.)

Research needs related to partially seeing children. Sight-Saving Rev. Summer, 1954. 24:2:94-99.

A report of the Committee on Education of Partially Seeing Children, a standing advisory committee of the National Society for the Prevention of Blindness. Presented are some problems--statistical, medical, social, psychological, and educational--which are of immediate concern to all those responsible for the health, education and welfare of this group of children.

PHYSICAL EDUCATION

968. Dubin, Harry N. (1920 E. Allegheny Ave., Philadelphia 34, Pa.)

Some observations on the place of physical education and a health program in building a program for the mentally retarded child. Am. J. Mental Deficiency. July, 1954. 59:1:6-12.

Experiences from the Parc School in Philadelphia bear out the writer's belief that in working with retarded children concrete activities with the game character serve best as the core around which other experiences can be built. He describes the physical education and health program of the School. Social competency, in his experience, can be more easily integrated in these children through the use of music and physical education.

PHYSICAL THERAPY--EQUIPMENT

969. Fisher, Myer (Home and Hospital for Jewish Incurables, London, England)
Mechanotherapy in rehabilitation; some simple apparatus and its use.
Brit. J. Phys. Med. July, 1954. 17:7:145-149, 168.

A detailed consideration of six kinds of apparatus, with their use, indications, and contra-indications. Included are: weight and pulley apparatus for the spinal extensor group of muscles, apparatus for weight resisted plantar-flexor and dorsi-flexor action of the ankle joint, cord and pulley apparatus for outward rotation of the gleno-humeral joint, heated sand bath to mobilize the joints and strengthen the muscles of the foot, and the heated sand tray to re-educate and re-develop movements of the thumb and fingers.

POLIOMYELITIS--DIAGNOSIS

970. Moskowitz, Eugene (220 N. Columbus Ave., Mt. Vernon, N. Y.)

Musculoskeletal disorders simulating poliomyelitis. J. Pediatrics. July, 1954. 45:1:51-56.

"The case material presented indicates some of the diagnostic problems encountered in children with musculoskeletal symptoms where poliomyelitis might be entertained as a possible diagnosis. Trauma should always be considered despite a negative history There were no neurological findings in any of the . . . cases The character of the pain was generally more localized than one would expect in an early case of poliomyelitis"--
Discussion.

See also 957.

POLIOMYELITIS--MEDICAL TREATMENT

971. Batson, Randolph (Vanderbilt Univ. Hosp., Nashville 4, Tenn.)

Fundamentals in poliomyelitis. GP (General Practitioner). July, 1954. 10:1:41-50. Reprint.

POLIOMYELITIS--MEDICAL TREATMENT (continued)

Medical management of the disease, matters relating to community problems, and recent advances in research in the prevention of poliomyelitis are discussed.

POLYNEURITIS

972. Jones, Idris

Facial diplegia in the Guillain-Barre syndrome. British Med. J. July 10, 1954. 4879:84-86.

"Six cases of the Guillain-Barre syndrome are described. All had facial diplegia. In four of them exaggeration of deep reflexes was observed in the pre-paralytic stage. Paraesthesiae and bilateral muscle tenderness followed by widespread paralysis of limbs were a feature in five of the cases."--Summary.

PROSTHESIS--DICTIONARIES

973. Purka, Steven

Glossary for prosthetists. Orthopedic & Prosthetic Appliance J. June, 1954. 8:2:41-43.

A short glossary of general, anatomical, operational and prosthetic terms and abbreviations compiled from a number of sources and useful to professional personnel or those working in the field of the physically handicapped.

PSYCHOLOGICAL TESTS

974. Walnut, Francis (1934 Calvert St., N. W., Washington 9, D. C.)

A personality inventory item analysis of individuals who stutter and individuals who have other handicaps. J. Speech and Hearing Disorders. June, 1954. 19:2:220-227.

A study designed to investigate the personalities of three groups: (1) persons having a speech defect (stuttering) but no known organic disorder, (2) persons having a speech defect (articulation) and an organic disorder (cleft palate), and (3) persons having no speech defect but who are crippled. The short form of the Minnesota Multiphasic Personality Inventory was administered to 141 persons of high school age. Results showed the stuttering, crippled, and cleft palate groups well within the normal range of personality as measured by the norms of the test, but in the 11 areas of the study certain deviations were found in some areas.

PSYCHOLOGY

975. Abt, Lawrence Edwin

The psychology of physical handicap; a statement of some principles. Orthopedic & Prosthetic Appliance J. June, 1954. 8:2:19-22.

A brief discussion of some of the factors which are important to an understanding of the effect of physical handicaps on the individual. The author suggests that, for a more complete statement of the material in this article, the reader refer to his chapter "Psychological Factors in the Adjustment of Amputees," in the book "Human Limbs and Their Substitutes," edited by P. E. Klopsteg and P. D. Wilson, New York, McGraw-Hill Publishing Co., 1954.

READING

976. Casey, Sally L.

Teaching reading to the hearing handicapped child. Volta Rev. June, 1954. 56:6:251-254.

READING (continued)

The three phases of the reading program of the acoustically handicapped child--reading readiness, initial instruction in reading, and development of independence in reading--are discussed in specific, practical terms.

RECREATION

977. Samuel, Susan (150 W. 85th St., New York 24, N. Y.)

Recreation, a must in habilitation and rehabilitation of a child with an orthopedic handicap. Cerebral Palsy Rev. June-July, 1954. 15:6 & 7:22:23.

Children with orthopedic handicaps need recreation to develop self reliance, social adjustment, and to provide the incentive for maximum development. Community facilities should be developed for the inclusion of handicapped children so that they may become a part of the community.

REHABILITATION

978. Klingman, Walter O. (Dept. of Neurology and Psychiatry, University of Virginia, University Station, Charlottesville, Va.)

Physiological mechanisms underlying rehabilitation of neurological disorders. Va. Med. Monthly. Apr., 1954. 81:4:146-151. Reprint.

Gives a brief review of the neuro-physiological mechanisms of the nervous system and shows how the nervous system adapts itself to injuries in the various parts. Prognosis for rehabilitation in various types of lesions is discussed. The need for facilities and personnel in all phases of rehabilitation is stressed.

This paper, as were the two references #979 and #981, was read as a part of the Rehabilitation Symposium at the annual meeting of the Medical Society of Virginia, Oct. 18-21, 1953.

979. Park, Herbert W. (Med. Coll. of Va., Richmond 19, Va.)

Disability control. Va. Med. Monthly. Apr., 1954. 81:4:156-158. Reprint.

" . . . The case reported indicates how a patient with a severe back injury was returned to full time work in less than one year by effective planning. " The writer describes the services and disciplines which were mobilized in the rehabilitation of this man and compares the cost of rehabilitation to those incurred in permanent disability.

980. Somers, Herman M. (Dept. of Political Science, Haverford College, Haverford, Pa.)

Rehabilitation and workmen's compensation, by Herman M. Somers and Anne R. Somers. Labor Law J. Mar., 1954. p. 189-204. Reprint.

Reprinted from Insurance Law J., Feb., 1954.

A chapter from the authors' forthcoming book Workmen's Compensation to be published by John Wiley & Sons. Rehabilitation, its economic value, and its relation to workmen's compensation are reviewed.

981. Wise, Charles S. (901 23rd St., N. W., Washington 7, D. C.)

The rehabilitation problem. Va. Med. Monthly. Apr., 1954. 81:4:143-145. Reprint.

A brief discussion of the factors involved in the limitations of personnel, facilities, and funds which prevent a solution to the overall problem of reha-

REHABILITATION (continued)

bilitation. The writer tells of what has been accomplished in providing the necessary facilities and personnel for rehabilitation work but stresses how far short the programs fall in meeting the demand.

REHABILITATION--GREAT BRITAIN

982. Great Britain. Central Council for the Care of Cripples (34 Eccleston Sq., London, S. W. 1, England)

Evidence submitted to the Interdepartmental Committee of Inquiry on the rehabilitation of disabled persons, 1953. London, The Council, 1953. 12 p.

Recommendations for the implementation of the provisions of the Disabled Persons (Employment) Act of 1944, the National Health Service Act, 1946 (amended 1949), and National Assistance Act (Part III), 1948, are made by the Central Council, emphasizing new problems which have arisen and those which have not been met satisfactorily. Subjects covered are registration and employment of the disabled, training provisions, sheltered employment, supplying aids and appliances and their maintenance, home care services, work for the homebound, payment for work, transportation, housing, and improved educational facilities, especially in the 15-17 age range.

RHEUMATIC FEVER

983. Engleman, Ephraim P. (655 Sutter St., San Francisco, Calif.)

Sequelae of rheumatic fever in men; four to eight year follow-up study, by Ephraim P. Engleman, Leo E. Hollister, and Felix O. Kolb. J. Am. Med. Assn. July 24, 1954. 155:13:1134-1140.

"Rheumatic heart disease as a sequel to rheumatic fever in adults was found in 32 patients, or 23.7% of the 135 men who were the subjects of this study. Only 18.4% of the 98 veterans who had had an initial attack of rheumatic fever during military service showed residual heart disease. This incidence is well below that reported for children and furnishes confirmatory evidence that the prognosis is relatively more favorable when rheumatic fever first occurs during adult life After an attack of rheumatic fever in adult life, the vast majority of these patients were able to resume normal lives. Ninety-five per cent were gainfully employed or in school at the time of the follow-up study "--Summary.

SCHOOL BUILDINGS

984. Illinois. Commission for Handicapped Children (160 N. LaSalle St., Chicago 1, Ill.)

Architectural blocks in school buildings; the problem and the solution. Chicago, The Commission, 1954. n.p. illus.

A brochure prepared by the Commission with the help of the firm of Bryant and Walchli, school architects, to illustrate architectural barriers in public schools which work a hardship on physically handicapped children who would, otherwise, be able to attend regular schools with the nonhandicapped. Practical suggestions are offered for the removal of such barriers; often such changes can be made at a nominal cost without the necessity of complete re-modelling.

985. U. S. Office of Education

Good and bad school plants in the United States as revealed by a nationwide school facilities survey, prepared by James L. Taylor. Washington, D. C. Govt. Print. Off., 1954. 77 p. illus. (Special publ. no. 2.)

SCHOOL BUILDINGS (continued)

A brochure consisting of pictures contrasting good and bad features of school building design and construction; pictures of facilities were gathered in a survey of 41 states and 4 territories. Contrasts are shown in the hope that they may inspire more functional planning of school facilities and to reveal some of the facts of the inequality of educational opportunity.

Available from U. S. Superintendent of Documents, Washington 25, D. C., at 50¢ a copy.

SOCIAL MATURITY

986. McCartney, Louise Dawley (1315 S. St. Paul St., Denver, Colo.)

A technique for developing social competency with a group of exogenous children classified as mentally retarded. Am. J. Mental Deficiency. July, 1954. 59:1:1-5. Reprint.

"This article attempts to relate some interesting procedures and content used by a group of parents under the guidance of the school and backed by authorities in the field of social maturity" The differential program planned for this group of children whose I. Q. falls in the 50-79 range was based on the idea of social competency as expressed by the Vineland Social Maturity Scale and by Edgar A. Doll in a recent publication, "The Measurement of Social Competency." A brief outline of the organization of the parent-teacher group discussions is given, with a sample of materials used with parents. The technique of demonstrations in the school followed by discussions with parents appears to be a valuable means of communication between home and school.

SOCIAL SERVICE--FINANCE

See 1000.

SPEECH CORRECTION

987. Burwell, Walter Brodie (Henderson, North Carolina)

Hoarseness due to vocal paralysis in heart failure from funnel chest. N. Carolina Med. J. June, 1954. 15:6:244-246.

The report of a case of vocal palsy due to cardiac failure from funnel chest. A possible etiologic mechanism is discussed; it is suggested that the failing heart must cause or contribute to a combination of compression-fixation and torsion-traction on the recurrent laryngeal nerve in order to produce hoarseness in this rare syndrome.

988. Lloyd, Gretchen Wright (815 Fifth Ave., N., Seattle, Wash.)

The classroom teacher's activities and attitudes relating to speech correction, by Gretchen Wright Lloyd and Stanley Ainsworth. J. Speech and Hearing Disorders. June, 1954. 19:2:244-249.

Fifty-five teachers, representing the first three grades in rural, small town and city school systems in two counties of Ohio, were interviewed for the purpose of discovering what the classroom teacher is doing to help children overcome speech problems, to find the extent of speech improvement activities carried on in the classroom, and to determine teachers' attitudes to carrying out suggestions offered for helping children with speech problems. Limitations of ability to do speech correction work and the amount of speech correction training and background information which teachers had were also investigated. Findings of the study have some important implications for the training of speech correctionists and the speech education of the classroom teacher.

SPEECH CORRECTION (continued)

989. Wohlmann, Regine F.

Total speech therapy. J. Am. Med. Women's Assn. July, 1954. 9:7: 218-221.

A case report of total speech therapy with a 4-year old girl with severe dyslalia, as a part of an immature behavior pattern. Speech training was not started until the therapeutic relationship was established. The author discusses specific procedures and the role of speech drills in total speech therapy.

990. Zaliouk, A. (Institute for the Deaf, Haifa, Israel)

A visual-tactile system of phonetical symbolization. J. Speech and Hearing Disorders. June, 1954. 19:2:190-207.

Describes a phonetical system of symbolization applied for the past ten years both in the speech clinic and the Institute for the Deaf in Haifa, Israel. An outline of the system and its therapeutic applications are presented, with a table describing completely all the phonetic symbols used in the Visual-Tactile System, and some examples of possible adaptation for English and French sounds. The system has its application in teaching speech to the deaf-mutes, aphasics and in the correction of defective speech. (The system includes mainly phonemes of the colloquial Hebrew language.) Illustrations.

SPEECH CORRECTION FUND

991. American Speech and Hearing Association

The Speech Correction Fund; objectives, policies and operating procedures. J. Speech and Hearing Disorders. June, 1954. 19:2:258-260.

A statement prepared by the Association's Committee on Speech Correction with the collaboration of Jayne Shover and Raymond L. Kahn, representatives of the National Society for Crippled Children and Adults. It tells briefly of the organization, operation, policies, and disbursements in the form of scholarship grants, and urges the support of all members of the profession and of persons and groups interested in the development of speech correction.

Copies of the statement may be obtained from George A. Kopp, Speech Clinic, Wayne University, Detroit, Mich., or from Speech Correction Fund, Rm. 1020, 11 S. LaSalle St., Chicago 3, Illinois.

SPORTS--BIOGRAPHY

See 1001.

STUTTERING

992. Rosenberg, Seymour (Human Resources Research Center, Randolph Air Force Base, Texas)

The effect of stuttering on the behavior of the listener, by Seymour Rosenberg and James Curtiss. J. Abnormal and Social Psychology. July, 1954. 49:3:355-361.

A description of the methods and results of an objective study of some of the listener responses which may be influenced by stuttering. Listeners were all normal speakers. Responses chosen for study were: eye contact, hand movement, and other bodily movements during stuttering and normal speech. Results showed that listener behavior is significantly affected by stuttering and stuttering seems to act as a behavioral depressant. "... The 'avoidant' activities of the listener may be of significance in classing stuttering as a negative reinforcer (noxious stimulus) to the listener."

STUTTERING (continued)

See also 974.

VOLUNTARY HEALTH AGENCIES

993. Press, Edward (Ill. Div. of Services for Crippled Children, 160 N. LaSalle St., Chicago 1, Ill.)

The medical profession and the voluntary health agencies. J. Am. Med. Assn. July 31, 1954. 155:14:1216-1219.

There are now over 20,000 voluntary health agencies in the U. S. As long as individuals retain their freedom of choice and action and have the wherewithall, these agencies will continue as a very pervasive pattern in the U. S., a pattern that physicians should recognize, and for the benefit of their patients and the medical profession with which they should become more thoroughly acquainted. On the basis of a survey conducted in 1952 in Chicago relating to a new voluntary group active in cerebral palsy, Dr. Press summarizes guiding principles that might apply in other communities to the problem of the relationship between new voluntary agencies and prior official health agencies.

VOLUNTEER WORKERS

994. Just Us Girls; careers and community service merge with a lot of fun in the volunteer hospital work done by these teen-age girls. Today's Health. August, 1954. 32:8:34, 50-51.

A community service organization called JUGs, composed of Akron, Colorado, high school girls who do volunteer work at the community's new 22-bed hospital provides an opportunity to serve the community, to develop an interest in nursing and allied vocations, to develop individual qualities of responsibility, poise and tact, and group recreation.

WALKING

995. Pohl, John F. (78 S. 9th St., Minneapolis, Minn.)

An appraisal of current methods of treating cerebral palsy: II. Treatment of locomotion in cerebral palsy. Am. Practitioner and Digest of Treatment. Feb., 1954. 5:2:121-122. Reprint.

Ten factors which concern walking in the cerebral palsied child are discussed briefly and a procedure described which the author has found helpful in attacking the conditions peculiar to cerebral palsy. The effect of the procedure upon walking factors when employed in the training program is discussed.

WHEEL CHAIRS

996. Skinner, Geraldine (Gen. Med. and Surgical Hosp., VA Center, Los Angeles, Calif.)

The wheel chair patient. Nursing World. July, 1954. 128:6:28-29.

Advice on selecting the proper wheel chair for the non-ambulatory patient and ways of assuring proper placement and body alignment of the patient in the chair.

New Books Briefly Noted

AMPUTATION--BIOGRAPHY

997. Brickhill, Paul

Reach for the sky; the story of Douglas Bader, legless ace of the Battle of Britain. New York, W. W. Norton & Co., c1954. 312 p. illus. \$3.75.

Classed as the best fighter leader and tactician of World War II, and also one of the best pilots, Douglas Bader has become a legend in his lifetime, but what makes his heroic feats so remarkable is the fact that he lost both legs in an air crash eight years before the war began. This book tells of his youth before the War, his air victories in the Battle of Britain, his capture by the Germans and his escapes, only to be recaptured and confined to Colditz for the duration of the War. Douglas Bader continues to lead an active life, plays an exceptional game of golf, has married, and continues to be a heroic example to others who are handicapped.

BLIND--DIRECTORIES

998. American Foundation for the Blind (15 W. 16th St., New York 11, N. Y.)

Directory of activities for the blind in the United States and Canada, compiled by Helga Lende. 10th ed. New York, The Foundation, 1954. 133 p. \$2.00.

This tenth annual directory lists public and private agencies whose activities are nation-wide in scope, state and local agencies for the blind, and a selected list of agencies by function. Data includes address, name of administrator, function and work of the agency, and types of services rendered.

MEDICINE--RESEARCH

999. Simmons, Leo W.

Social science in medicine, by Leo W. Simmons and Harold G. Wolff. New York, Russell Sage Foundation, 1954. 254 p. \$3.50.

There is an increasing awareness that human beings, sick or well, must be regarded simultaneously as an organism, a member of society, and a personality in a culture. Medical leadership is thus turning more and more to the social sciences in helping them to solve their medical problems. The authors explore some of the major areas of interest shared by medicine and the social sciences. They point the way by clarifying social science concepts that have a bearing on medical practice and stress the need for continued research and effort in the two related fields. The book, addressed primarily to medical and social science students interested in research in these areas, may be of value to leaders of health and welfare programs and to members of professions allied with medical specialists in preventing and treating disease. Extensive bibliography.

SOCIAL SERVICE--FINANCE

1000. Jones, John Price

The American giver; a review of American generosity. New York, Inter-River Pr., c1954. 119 p. tabs.

Gives a brief history of American philanthropy and an analysis of the various types of givers--individual, corporate, foundation, labor organizations--and their recipients in the fields of research, education, the arts,

SOCIAL SERVICE--FINANCE (continued)

health and welfare agencies, colleges, and war relief. The author has, for many years issued thus an annual classified report of American gifts to philanthropy.

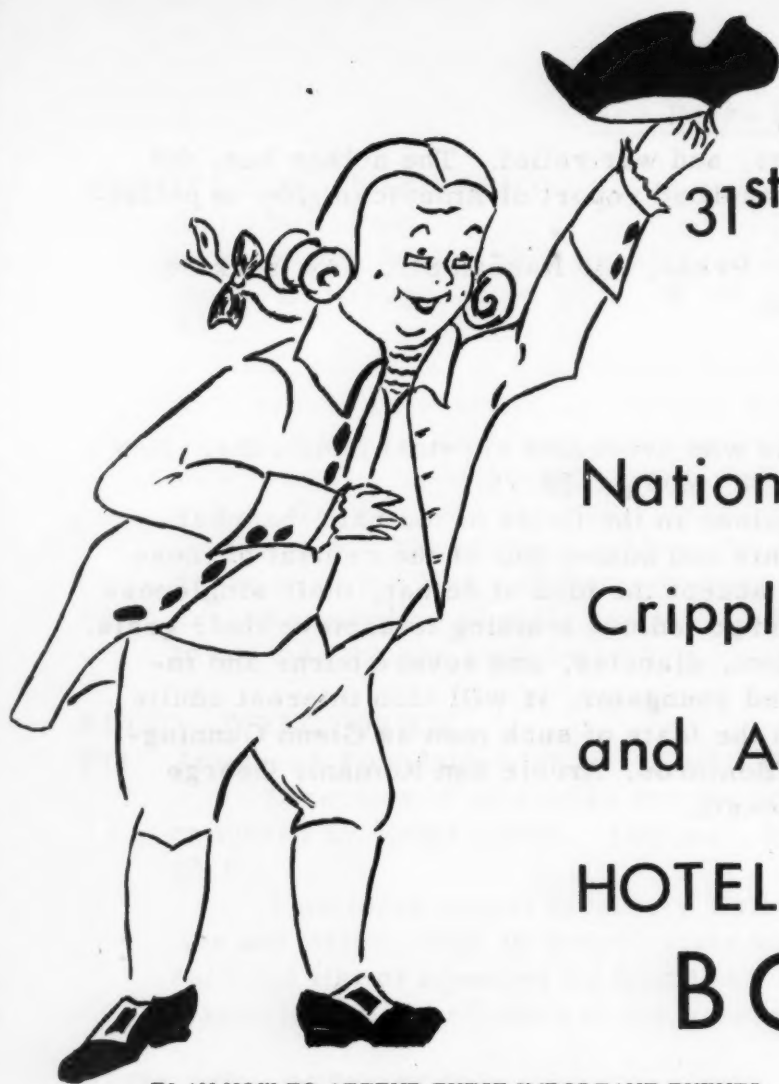
Available from the Inter-River Press, 150 Nassau St., New York 38, N. Y., at \$2.50 a copy. Paperbound.

SPORTS--BIOGRAPHY

1001. Boynick, David K.

Champions by setback; athletes who overcame physical handicaps. New York, Thomas Y. Crowell Co., c1954. 205 p. \$2.75.

Ten dramatic stories of champions in the fields of football, baseball, golf, racing, track, swimming, tennis and boxing tell of the refusal of these men, all physically handicapped, to accept the idea of defeat, their singleness of purpose and their capacity to undergo tedious training to achieve their goals. Handicaps included blindness, clubfoot, diabetes, and severe burns and injuries. A book for the sports-minded youngster, it will also interest adults who are perhaps more familiar with the feats of such men as Glenn Cunningham, James J. Braddock, William Bonthron, Archie San Romani, George Woolf, Martin Marion, and John Hackett.



1954

31st NATIONAL

CONVENTION

National Society for
Crippled Children
and Adults

HOTEL STATLER
BOSTON

PLAN NOW TO ATTEND THESE IMPORTANT EVENTS

Easter Seal Institute, Tuesday, November 2

(Easter Seal Society staff and board members only)

Tours of New England's outstanding rehabilitation facilities

General sessions, institutes, panels and seminars, November 3 - 6

Boston Tea Party, welcoming event, Wednesday evening, November 3

Parents Luncheon

Handicapped Panel

President's Dinner,

General session "The Rehabilitation Team in Action" Saturday, November 6

HEAR THESE NOTABLE SPEAKERS, AMONG OTHERS:

Senator John Kennedy of Massachusetts

Mrs. Ivy Baker Priest, Treasurer of the United States

Margaret Mead, Ph. D., noted anthropologist and Associate Curator
of Ethnology, American Museum of Natural History, New York

William C. Menninger, M. D., General Secretary, Menninger
Foundation, Topeka, Kansas

August Thorndike, M. D., President, Bay State Medical
Rehabilitation Clinic, Boston

William T. Green, M. D., Boston, orthopedic surgeon
and Chairman, Joint Committee on the Public Care
of Crippled Children

Howard A. Rusk, M. D., Director of the Institute of
Physical Medicine and Rehabilitation, New York
University - Bellevue Medical Center

Romaine P. Mackie, Ph. D., Chief, Exceptional Children
and Youth, U.S. Office of Education, Washington, D. C.

Basil O'Connor, President, National Foundation for
Infantile Paralysis, New York

A CONVENTION OF IMPORTANCE TO

physicians, physical, occupational and speech
therapists, social workers, teachers, recreation
workers, parents, volunteers and employers.



tuesday, november 2

through noon

saturday, november 6

